

DECLARATION AND POWER OF ATTORNEY

As below named Inventor, I hereby declare that:

My resident, post office address and citizenship are as stated below next to my name; I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled **A CELL GROWTH METHOD AND DEVICE WITH MULTIPLE APPLICATIONS**, the specification of which

☒ is attached hereto.

☐ was filed on _____ as Application Serial No. _____ and was amended on _____.
(if applicable)

☐ I hereby state that I have reviewed and understand the contents of the above identified specification, including the claims, as amended by any amendment referred to above.

☐ I do not know and do not believe that the invention was ever known or used in the United States of America before my or our invention thereof; I do not know and do not believe that the invention was ever patented or described in any printed publication in any country before my or our invention thereof or more than one year prior to this application; I do not know and do not believe that the invention was in public use or on sale in the United States of America more than one year prior to this application; I acknowledge the duty to disclose information which is material to the examination of this application in accordance with Title 37, Code of Federal Regulations, §1.56(a).

I hereby claim foreign benefits under Title 35, United States Code, §119 of any foreign applications(s) for patent or inventor's certificate listed below and have also identified below any foreign application on which priority is claimed:

<u>Prior Foreign Applications(s)</u>			<u>Priority Claimed</u>	
<u>99-06820</u> (Number)	<u>France</u> (Country)	<u>26/05/1999</u> (Day/Month/Year Filed)	<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No
<u>PCT/FR00/01311</u> (Number)	<u>PCT</u> (Country)	<u>16/05/00</u> (Day/Month/Year Filed)	<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No
_____ (Number)	_____ (Country)	_____ (Day/Month/Year Filed)	<input type="checkbox"/> Yes	<input type="checkbox"/> No

I hereby claim the benefit under Title 35, United States Code, §120 of any United States application(s) listed below and, insofar as the subject matter of each of the claims of this application is not disclosed in the prior United States application in the manner provided by the first paragraph of Title 35, United States Code §112, I acknowledge the duty to disclose material information as defined in Title 37, Code of Federal Regulations §1.56(a) which occurred between the filing date of the prior application and the national or PCT international filing date of this application:

(Application Serial No.)

(Filing Date)

(Status)
(Patented, pending, abandoned)

(Application Serial No.)

(Filing Date)

(Status)
(Patented, pending, abandoned)

POWER OF ATTORNEY

As named inventor, I hereby appoint the following attorney(s) and/or agent(s) to prosecute this application and transact all business in the Patent and Trademark Office connected therewith.

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I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under Section 1001 of Title 18 of the United States Code and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

Full name of sole or first inventor: Luc DOUAY

Residence:

Citizenship:

Post Office Address:

Inventor's Signature

Date

Full name of second inventor: Jean-Luc MAGALHAES

Residence:

Citizenship:

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Inventor's Signature

Date

Full name of third inventor: Florence HUMMEL

Residence:

Citizenship:

Post Office Address:

Inventor's Signature

Date